| | PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | | Application or Docket Number | | | |
|--|--|---|--|--|--|--|----------|-------------------|------------------------|--|---------------------|------------------------|--|
| 1 | CLAIMS AS FILED - PART I National Stage Pro | | | | | | | echa | | | / Almoton Elvaredo | | |
| 1 | | | | Persisgal Specialist mn 1) (703):006-0421 | | | <u> </u> | SMALL ENTITY TYPE | | ORIVING THE PROPERTY ORIVING ASSESSED | | | |
| U.S. NATIONAL STAGE FEES | | | | | | | | RATE | FEE | ٦ " | RATE | FEE | |
| BASIC FEE | | | SMALL ENT. = \$ 150 | | LARGE ENT. = \$ 300 | | 1 | BASIC FEE | 1 | OR | BASIC FEE | 200 | |
| EXAMINATION FEE | | | | Satisfies PCT Article 33(1)- (4) = \$50/\$100 | | All other situations = \$ 100 / \$ 200 | | EXAM. FEE | 1 | 7 | EXAM FEE | 200 | |
| SEARCH FEE | | | U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400 | | All other situations = \$ 250 / \$ 500 | | | SEARCH FEE | : | | SEARCH FEE | 400 | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | | Н | X \$ 125 = | 1. | 1 | X \$ 250 = | 1200 | |
| TOTAL CHARGEABLE CLAIMS | | | 6 minus 20 = | | • – | | | X \$ 25;= | | OR | X \$ 50 = | | |
| INC | DEPENDENT | LAIMS | / minus 3 = | | . – | | | X \$ 100 = | | OR | X \$ 200 = | | |
| MEU | LTIPLE DEPEN | IDENT CLAIM PR | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| • 1 | * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTAL | 900 | |
| CLAIMS AS AMENDED - PART II OTHER THAN | | | | | | | | | | | | | |
| | | | SMALL E | ENTITY | OR | OTHER SMALL E | | | | | | | |
| AMENDMENT A | 12.03.55 | CLAIMS REMAINING | | HIGHE | ER | PRESENT | ſ | RATE | ADDI- TIONAL | 1 | \ | ADDI- | |
| | 13.0 12 | AFTER AMENDMENT | | PREVIO PAID F | | EXTRA | | | FEE | | RATE | TIONAL | |
| | Total | . 6 | Minus | - a | 0 | a 0 | | X \$ 25 = | | OR | X \$ 60 = | | |
| | Independent | • | Minus | *** 3 | 3 | - 0 | | X \$ 100 = | | OR | X \$ 200= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | +\$,360 = | | |
| | | | | | | | ٦ | FEE | | OR | TOTAL ADDIT. | | |
| | | (Column 1) | | (Oak | - 01 | (0.1 a) | | , | | | , | | |
| 8 | | CLAIMS REMAINING AFTER AMENDMENT | | (Colum HIGHE NUMBI PREVIOL PAID F | ST ER JSLY | (Column 3) PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | 2 | Γ | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | • | Minus | *** | | . | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRES | ENTATION OF MI | JLTIPLE DEP | NDENT CL | AIM | | | + \$ 180 = | | OR | +\$360= | - P | |
| | | | | | | | T | OTAL ADOIT. | | OR | TOTAL ADDIT. FEE | | |
| | | | | | | <u>-</u> - | - | | | . . . | , | | |
| | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "2", enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1, | | | | | | | | | | | | |